

09/582.718²

52



PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

#9

In re application of

Simo TAIMELA

Serial No. 09/582,718
(PCT/FI98/01024)

Refund Section
Accounting Division
Office of Finance

Filed June 30, 2000

APPARATUS FOR EXERCISE AND/OR
REHABILITATION OF NECK EXTENSORS

REQUEST FOR REFUND

Assistant Commissioner for Patents

Washington, D.C. 20231

Sir:

We enclose the verified statement of the assignee to establish small entity status under 37 CFR 1.9 and 37 CFR 1.27 and request that 1/2 of the original filing fee, namely \$505, be credited to Deposit Account No. 25-0120 as the attached statement is filed within the two-month term.

Respectfully submitted,

YOUNG & THOMPSON

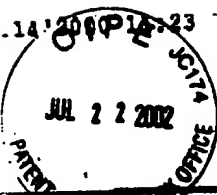
By

Robert J. Patch
Attorney for Applicant
Registration No. 17,355
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Telephone: 703/521-2297

Watch and Return

August 30, 2000

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Lines on original copy 735307

Form B

Docket Number (Optional)

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS **(37 CFR 1.9(f) & 1.27(c))--SMALL BUSINESS CONCERN**

Applicant or Patentee: DBC International Oy

Serial or Patent No.: _____

Filed or Issued: _____

Title: Apparatus for Exercise and/or rehabilitation of neck extensors

I hereby declare that I am

- ☐ the owner of the small business concern identified below.
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN DBC International Oy
 ADDRESS OF SMALL BUSINESS CONCERN Köyhämäentie 19, FIN-01510 Vantaa, Finland

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 37 CFR 1.21.12, reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention described in:

- ☐ the specification filed herewith with title as listed above.
☐ the application identified above.
☐ the patent identified above.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention must file a separate verified statement averring to their status as small entities, and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(a), or a nonprofit organization under 37 CFR 1.9(c).

Each person, concern or organization having any rights in the invention is listed below:

- ☐ no such person, concern, or organization exists.
☐ each such person, concern, or organization is listed below.

Separate verified statements are required from each named person, concern or organization having rights in the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the amount of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.23(a))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING _____

Simo Taimela

MANAGING DIRECTOR

TITLE OF PERSON IF OTHER THAN OWNER _____

ADDRESS OF PERSON SIGNING Köyhämäentie 19, FIN-01510 Vantaa, Finland

SIGNATURE _____

DATE Aug 11, 2000

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail Box ISSUE FEE**
Commissioner for Patents
Washington, D.C. 20231
Fax (703)746-4000

JUL 22 2002

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)
 000466 7590 05/07/2002

YOUNG & THOMPSON
 745 SOUTH 23RD STREET 2ND FLOOR
 ARLINGTON, VA 22202

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above, or being facsimile transmitted to the USPTO, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

09/582,718

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/582,718	06/30/2000	SIMO TAIMELA	13530J	8380

TITLE OF INVENTION: APPARATUS FOR EXERCISE AND/OR REHABILITATION OF NECK EXTENSORS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO YES	\$1380 \$640	\$0	\$1380 \$640	08/07/2002

EXAMINER	ART UNIT	CLASS-SUBCLASS
DONNELLY, JEROME W	3764	482-093000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

DBC INTERNATIONAL OY

Vantaa, Finland

Please check the appropriate assignee category or categories (will not be printed on the patent) ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☐ Advance Order - # of Copies

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Commissioner is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 25-0120 (enclose an extra copy of this form).

Commissioner for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Benoit Castel (Date)

Benoit Castel #35,041 July 22, 2002

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

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